

Rev. 12/15

UNITED STATES BANKRUPTCY COURT

District of North Dakota

IN RE:

EPIC Companies Midwest 2023, LLC

Bankruptcy No: 24-30282

Chapter: 11

Debtor(s)

AMENDMENT COVER SHEET

Schedules and Statements Amended (check all that apply):

- ☐ Voluntary Petition (describe change) _____
- ☐ Summary of Assets and Schedules and Liabilities and Certain Statistical Information
- ☐ Schedule A/B - Property
- ☐ Schedule C - The Property You Claim as Exempt
- ☐ Schedule D - Creditors Who Hold Claims Secured By Property
- ☒ Schedule E/F - Creditors Who Have Unsecured Claims
- ☐ Schedule G - Executory Contracts and Unexpired Leases
- ☐ Schedule H - Codebtors
- ☐ Schedule I - Your Income
- ☐ Schedule J - Your Expenses
- ☐ Declaration Concerning Schedules
- ☐ Statement of Financial Affairs
- ☐ Attorney's Disclosure of Compensation
- ☐ Statement of Intention for Individuals Filing Under Chapter 7
- ☐ Statement of Current Monthly Income
- ☐ Other _____

If amending schedules D or E/F, the amendment is to:

- ☐ Add new creditor(s) (*Notice to Creditor(s) of Amended Schedules(s) must be served and filed*)
- ☒ Correct or Delete Information

Describe changes made: Corrections to names and addresses of investment creditors on Schedule F.
(Examples: Added or Reclassified Creditor "X"; Add or modified exempt property "X")

DECLARATION

I certify under penalty of perjury that the foregoing is true and correct, and that the attached amendments are true and correct.

DATED: August 16, 2024 _____

Signature /s/ Patrick Finn

Patrick Finn, Lighthouse Management Group, Inc.,
Chief Restructuring Officer of the Debtor

Debtor1

Debtor2

Fill in this information to identify the case:

Debtor name EPIC Companies Midwest 2023, LLC

United States Bankruptcy Court for the: DISTRICT OF NORTH DAKOTA

Case number (if known) 24-30282

☒ Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. **Real property:**

Copy line 88 from *Schedule A/B*..... \$ 0.00

1b. **Total personal property:**

Copy line 91A from *Schedule A/B*..... \$ 12,378,612.82

1c. **Total of all property:**

Copy line 92 from *Schedule A/B*..... \$ 12,378,612.82

Part 2: Summary of Liabilities

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ 0.00

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

3a. **Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ 0.00

3b. **Total amount of claims of nonpriority amount of unsecured claims:**

Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ 12,327,013.00

4. **Total liabilities**
Lines 2 + 3a + 3b

\$ 12,327,013.00

Fill in this information to identify the case:

Debtor name EPIC Companies Midwest 2023, LLC

United States Bankruptcy Court for the: DISTRICT OF NORTH DAKOTA

Case number (if known) 24-30282

☒ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.

☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

| | | | Total claim | Priority amount |
|-----|--|---|-------------|-----------------|
| 2.1 | <p>Priority creditor's name and mailing address</p> <p>Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)</p> | <p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Notice Only</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> | \$0.00 | \$0.00 |
| 2.2 | <p>Priority creditor's name and mailing address</p> <p>North Dakota State Tax Commissioner Office of State Tax Commissioner PO Box 5623 Bismarck, ND 58506-5623</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)</p> | <p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Taxes</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> | \$0.00 | \$0.00 |

Debtor EPIC Companies Midwest 2023, LLC
NameCase number (if known) 24-30282

| | | | | |
|-----|--|--|---------------|---------------|
| 2.3 | Priority creditor's name and mailing address <u>Office of Attorney General</u> <u>600 East Boulevard Avenue, Dept.</u> <u>125</u> <u>Bismarck, ND 58505-0040</u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | <u>\$0.00</u> | <u>\$0.00</u> |
| | Date or dates debt was incurred _____ | Basis for the claim: <u>Notice Only</u> | | |
| | Last 4 digits of account number _____ | Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | |
| | Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | | | |

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

| | | | Amount of claim | |
|-----|--|---|---------------------|--|
| 3.1 | Nonpriority creditor's name and mailing address Anita M Anderson Revocable Trust <u>Anita M. Anderson Revocable Trust</u> <u>Anita M Anderson</u> <u>5136 Mesabi Lane</u> <u>Hibbing, MN 55746</u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | <u>\$50,000.00</u> | |
| | Date(s) debt was incurred _____ | Basis for the claim: <u>Investment Creditor</u> | | |
| | Last 4 digits of account number _____ | Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | |
| 3.2 | Nonpriority creditor's name and mailing address Arnold & Luella Gomke <u>Arnold A. Gomke & Luella J. Gomke</u> <u>5965 Britannia Boulevard</u> <u>Tavares, FL 32778</u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | <u>\$150,000.00</u> | |
| | Date(s) debt was incurred _____ | Basis for the claim: <u>Investment Creditor</u> | | |
| | Last 4 digits of account number _____ | Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | |
| 3.3 | Nonpriority creditor's name and mailing address <u>Arrow, LLC</u> <u>Dr. Fadel Nammour</u> <u>3419 1st Street E</u> <u>West Fargo, ND 58078</u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | <u>\$100,000.00</u> | |
| | Date(s) debt was incurred _____ | Basis for the claim: <u>Investment Creditor</u> | | |
| | Last 4 digits of account number _____ | Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | |
| 3.4 | Nonpriority creditor's name and mailing address Audrey Smith <u>Audrey Grace Smith</u> <u>509 6th Ave</u> <u>Marion, ND 58466</u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | <u>\$200,000.00</u> | |
| | Date(s) debt was incurred _____ | Basis for the claim: <u>Investment Creditor</u> | | |
| | Last 4 digits of account number _____ | Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | |
| 3.5 | Nonpriority creditor's name and mailing address <u>Beth Postemski</u> <u>430 Oak Street</u> <u>Steamboat Springs, CO 80477</u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | <u>\$152,304.00</u> | |
| | Date(s) debt was incurred _____ | Basis for the claim: <u>Investment Creditor</u> | | |
| | Last 4 digits of account number _____ | Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | |

Debtor EPIC Companies Midwest 2023, LLC Case number (if known) 24-30282

Name

| | | | |
|------|---|---|-----------------------|
| 3.6 | Nonpriority creditor's name and mailing address Bill Leier & Teri Brackenbury Leier 320 32nd West Ave W #302 West Fargo, ND 58078 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$27,109.00</u> |
| 3.7 | Nonpriority creditor's name and mailing address Brian Goeser PO Box 114 Munich, ND 58352 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$190,458.00</u> |
| 3.8 | Nonpriority creditor's name and mailing address BWK Real Estate LLC Bart Kounovsky 55 Copper Rose Ct Steamboat Springs, CO 80487 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$10,000.00</u> |
| 3.9 | Nonpriority creditor's name and mailing address Clifford Otten 908 Shady Lane East Wayzata, MN 55391 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$1,054,272.00</u> |
| 3.10 | Nonpriority creditor's name and mailing address Cordell Wold PO Box 1402 Watford City, ND 58854 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$100,000.00</u> |
| 3.11 | Nonpriority creditor's name and mailing address Curt Christofferson 723 7th St. E Napoleon, ND 58561 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$50,000.00</u> |
| 3.12 | Nonpriority creditor's name and mailing address Cynthia Ellingson PO Box 220 Sherwood, ND 58782 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$100,000.00</u> |
| 3.13 | Nonpriority creditor's name and mailing address Darryl Lee Edwards 8211 62nd St SE Edgeley, ND 58433 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$240,000.00</u> |

Debtor EPIC Companies Midwest 2023, LLC Case number (if known) 24-30282

Name

| | | | |
|------|---|---|-----------------------|
| 3.14 | Nonpriority creditor's name and mailing address <u>David Schall</u> David M. Schall 301 Woodland Circle Grand Forks, ND 58201 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$2,566,835.00</u> |
| 3.15 | Nonpriority creditor's name and mailing address <u>David Warrey</u> David R. Warrey 541 Willow Bend Circle Casselton, ND 58012 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$120,000.00</u> |
| 3.16 | Nonpriority creditor's name and mailing address <u>Dean & Beth Schoenburg</u> 4260 Highway 5 Mohall, ND 58761 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$54,000.00</u> |
| 3.17 | Nonpriority creditor's name and mailing address <u>Dianna Schumacher</u> 606 S. Main St Milbank, SD 57252 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$25,000.00</u> |
| 3.18 | Nonpriority creditor's name and mailing address <u>Donald Kounovsky</u> 1201 North 1st Street Fargo, ND 58102 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$250,000.00</u> |
| 3.19 | Nonpriority creditor's name and mailing address <u>Donna & Michael Klein</u> 6201 121st Ave. SE Minot, ND 58701 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$31,603.00</u> |
| 3.20 | Nonpriority creditor's name and mailing address <u>Duane Foley</u> 1401 35th Ave SW Minot, MN 58701 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$50,836.00</u> |

| | | | |
|--------|---|------------------------|----------|
| Debtor | EPIC Companies Midwest 2023, LLC <small>Name</small> | Case number (if known) | 24-30282 |
|--------|---|------------------------|----------|

| | | | |
|------|--|---|---------------------|
| 3.21 | Nonpriority creditor's name and mailing address Elizabeth Gooser Elizabeth Jane Gooser 2306 College Dr N Devils Lake, ND 58301 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$235,625.00</u> |
| | | | |
| 3.22 | Nonpriority creditor's name and mailing address EPIC Skyline, LLC Vicki Campbell PO Box 879 Minot, ND 58702 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$300,000.00</u> |
| | | | |
| 3.23 | Nonpriority creditor's name and mailing address Essential Living Inc 400 10th St SE Minot, ND 58701 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$300,000.00</u> |
| | | | |
| 3.24 | Nonpriority creditor's name and mailing address Gary Foss 8468 Highway 3 Rolette, ND 58366 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$100,000.00</u> |
| | | | |
| 3.25 | Nonpriority creditor's name and mailing address Gene & Sherry Rode PO Box 66 Marion, ND 58466-0066 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$150,000.00</u> |
| | | | |
| 3.26 | Nonpriority creditor's name and mailing address Harold & Robin Hultberg 884 31st Ave NW Coleharbor, ND 58531 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$103,711.00</u> |
| | | | |
| 3.27 | Nonpriority creditor's name and mailing address Harold Hultberg Harold C. Hultberg 884 31st Ave NW Coleharbor, ND 58531 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$102,304.00</u> |

| | | | |
|--------|---|------------------------|----------|
| Debtor | EPIC Companies Midwest 2023, LLC <small>Name</small> | Case number (if known) | 24-30282 |
|--------|---|------------------------|----------|

| | | | |
|------|--|---|--------------|
| 3.28 | Nonpriority creditor's name and mailing address HTG Investments LLC Holly Gibb 3212 Crestbrook Court Prospect, KY 40059 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$53,906.00 |
| | | | |
| 3.29 | Nonpriority creditor's name and mailing address JAK23 LLC Aaron Johnson 4424 S Technology Drive Sioux Falls, SD 57106 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$200,000.00 |
| | | | |
| 3.30 | Nonpriority creditor's name and mailing address James D. Olson Trust 2850 Longfellow Rd Fargo, ND 58102 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$260,336.00 |
| | | | |
| 3.31 | Nonpriority creditor's name and mailing address Jeff & Peggy Miller Jeffrey L. & Peggy M. Miller 1920 Riverwood Drive Bismarck, ND 58504 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$175,000.00 |
| | | | |
| 3.32 | Nonpriority creditor's name and mailing address Jeffrey McKay Descendants Irrevocable Tr Jeffrey McKay 1337 Elm Circle N Fargo, ND 58102 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$147,500.00 |
| | | | |
| 3.33 | Nonpriority creditor's name and mailing address Jeremy Moe 22213 Dakota Ave Lakeville, MN 55044 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$50,417.00 |
| | | | |
| 3.34 | Nonpriority creditor's name and mailing address Jerry Meyers 2115 147th Ave. SE Erie, ND 58029 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$100,000.00 |

Debtor EPIC Companies Midwest 2023, LLC Case number (if known) 24-30282

Name

3.35 Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: Check all that apply. \$47,500.00

~~Jim & JoAnn McKay Family Trust~~
13707 Sewell Ln
Hudson, FL 34667

Jim & JoAnn McKay Family Trust fbo Julie
McKay Ganskop
Attn: Julie Ganskop
6721 Schelee Court NW
Rochester, MN 55901

☐ Contingent
☐ Unliquidated
☐ Disputed

Date(s) debt was incurred _

Basis for the claim: Investment Creditor

Last 4 digits of account number _

Is the claim subject to offset? ☒ No ☐ Yes

3.36 Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: Check all that apply. \$100,000.00

~~Jim & JoAnn McKay Family Trust~~
13707 Sewell Ln
Hudson, FL 34667

Jim & JoAnn McKay Family Trust fbo Julie
McKay Ganskop
Attn: Julie Ganskop
6721 Schelee Court NW
Rochester, MN 55901

☐ Contingent
☐ Unliquidated
☐ Disputed

Date(s) debt was incurred _

Basis for the claim: Investment Creditor

Last 4 digits of account number _

Is the claim subject to offset? ☒ No ☐ Yes

3.37 Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: Check all that apply. \$30,000.00

~~Kandas Edwards~~
Kandas Pearl Edwards
8211 62nd St SE
Edgeley, ND 58433

☐ Contingent
☐ Unliquidated
☐ Disputed

Date(s) debt was incurred _

Basis for the claim: Investment Creditor

Last 4 digits of account number _

Is the claim subject to offset? ☒ No ☐ Yes

3.38 Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: Check all that apply. \$200,000.00

Katherine Jean Backen-Andersen
117 3rd Ave East
West Fargo, ND 58078

☐ Contingent
☐ Unliquidated
☐ Disputed

Date(s) debt was incurred _

Basis for the claim: Investment Creditor

Last 4 digits of account number _

Is the claim subject to offset? ☒ No ☐ Yes

3.39 Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: Check all that apply. \$40,000.00

Kimberly Voltz
7332 Summerland Cove
Lakewood Ranch, FL 34202

☐ Contingent
☐ Unliquidated
☐ Disputed

Date(s) debt was incurred _

Basis for the claim: Investment Creditor

Last 4 digits of account number _

Is the claim subject to offset? ☒ No ☐ Yes

3.40 Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: Check all that apply. \$27,265.00

Kristen Kounovsky
3680 54th St S
Fargo, ND 58104

☐ Contingent
☐ Unliquidated
☐ Disputed

Date(s) debt was incurred _

Basis for the claim: Investment Creditor

Last 4 digits of account number _

Is the claim subject to offset? ☒ No ☐ Yes

Debtor EPIC Companies Midwest 2023, LLC Case number (if known) 24-30282

Name

| | | |
|------|--|---|
| 3.41 | Nonpriority creditor's name and mailing address Larry & Betty Ledene Larry M. Ledene & Betty A. Ledene PO Box 155 Powers Lake, ND 58773 Larry M. Ledene & Betty A. Ledene 300 4th Ave West, PO Box 155 Powers Lake, ND 58773 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$200,000.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| 3.42 | Nonpriority creditor's name and mailing address Larry & Letitia Johnson 603 3rd Ave NE Jamestown, ND 58401 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$80,000.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| 3.43 | Nonpriority creditor's name and mailing address Larry Senechal 4574 4th Ave NE Balfour, ND 58712 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$50,000.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| 3.44 | Nonpriority creditor's name and mailing address Leon or Janell Vandeberg 2114 16th Court W Williston, ND 58801 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$500,000.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| 3.45 | Nonpriority creditor's name and mailing address Liberty Development, LLC Vicki Campbell 400 10th Street SE Minot, ND 58701 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$170,000.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| 3.46 | Nonpriority creditor's name and mailing address Lonnie & Mary Hass 1909 9th Street N Fargo, ND 58102 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$30,000.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| 3.47 | Nonpriority creditor's name and mailing address Loren Goeser 8951 79th Ave NE Munich, ND 58352 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$598,276.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor EPIC Companies Midwest 2023, LLC Case number (if known) 24-30282

Name

| | | |
|------|--|---|
| 3.48 | Nonpriority creditor's name and mailing address M&S Concessions, LLC Vicki Campbell 400 10th Street SE Minot, ND 58701 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$100,000.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| 3.49 | Nonpriority creditor's name and mailing address Mark & Terese Ahmann 9426 Large Court NE Ostego, MN 55330 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$140,000.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| 3.50 | Nonpriority creditor's name and mailing address Mary Berning 1223 15th Ave Sw Minot, MN 58701 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$100,000.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| 3.51 | Nonpriority creditor's name and mailing address Mason Morelli 1624 Apple Way Minot, ND 58701 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$52,336.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| 3.52 | Nonpriority creditor's name and mailing address Matthew & Kelly Morelli Matthew P. & Kelly D. Morelli 1624 Apple Way Minot, ND 58701 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$54,672.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| 3.53 | Nonpriority creditor's name and mailing address Matthew & Kelly Morelli 1624 Apple Way Minot, ND 58701 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$50,208.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| 3.54 | Nonpriority creditor's name and mailing address Michael & Nadine Schutz Michael & Nadine Marie Schutz 9039 Parkside Drive Woodbury, MN 55125 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$75,000.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor EPIC Companies Midwest 2023, LLC Case number (if known) 24-30282

Name

| | | |
|------|---|--|
| 3.55 | Nonpriority creditor's name and mailing address Michelle Charbonneau 2014 7th St W Dickinson, ND 58601 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$50,000.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| 3.56 | Nonpriority creditor's name and mailing address Nick and/or Deborah Vollmuth 2640 96th Street Selfridge, ND 58568 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$50,250.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| 3.57 | Nonpriority creditor's name and mailing address North Dakota Street Rod Association Kolynne Speer 21423 190th Ave N Ulen, MN 56585 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$20,000.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| 3.58 | Nonpriority creditor's name and mailing address Patrick & Laura Morelli 1300 13th St SW Minot, ND 58701 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$52,544.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| 3.59 | Nonpriority creditor's name and mailing address Paul Antonucci P.O. Box 773694 Steamboat Springs, CO 80477 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$100,000.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| 3.60 | Nonpriority creditor's name and mailing address Raoul K Brandt Trust Raoul Brandt PO Box 327 Stanley, ND 58784 Raoul K Brandt Trust Raoul Brandt 903 1st St SE, PO Box 327 Stanley, ND 58784 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$50,000.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| 3.61 | Nonpriority creditor's name and mailing address Ritchie Valen 502 Lorene Drive O'Fallon, MO 63366 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$5,000.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor EPIC Companies Midwest 2023, LLC Case number (if known) 24-30282
Name

| | | | |
|-------|---|---|---------------------|
| 3.62 | Nonpriority creditor's name and mailing address Rob & Joleen Heim Trust Joleen Heim 2313 8th St. E Dickinson, ND 58601 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$250,000.00</u> |
| <hr/> | | | |
| 3.63 | Nonpriority creditor's name and mailing address Scott Baisch 410 3rd Ave NW Hazen, ND 58545 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$405,566.00</u> |
| <hr/> | | | |
| 3.64 | Nonpriority creditor's name and mailing address Shirley Valen 2550 450th St. Gary, MN 56545 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$20,000.00</u> |
| <hr/> | | | |
| 3.65 | Nonpriority creditor's name and mailing address Spencer Olson 4740 95th St. NW Mohall, ND 58761 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$5,453.00</u> |
| <hr/> | | | |
| 3.66 | Nonpriority creditor's name and mailing address Tanya Senechal 4574 4th Ave NE Balfour, ND 58712 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$5,549.00</u> |
| <hr/> | | | |
| 3.67 | Nonpriority creditor's name and mailing address Terry & Ann Zeltinger 1803 24th St. SW Minot, ND 58701 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$55,169.00</u> |
| <hr/> | | | |
| 3.68 | Nonpriority creditor's name and mailing address Todd & Cindy Brown 6060 66th Ave NW Berthold, ND 58718 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$107,198.00</u> |
| <hr/> | | | |
| 3.69 | Nonpriority creditor's name and mailing address Vernie Baesler Vernie D. Baesler P.O. Box 144 Hazen, ND 58545 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment Creditor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$102,769.00</u> |

Debtor EPIC Companies Midwest 2023, LLC Case number (if known) 24-30282

3.70 Nonpriority creditor's name and mailing address Westbrand & Co. FBO Robert Nowak As of the petition filing date, the claim is: *Check all that apply.* \$50,417.00

Westbrand & Co FBO Robert Nowak S/D Roth
IRA
3216 1st St SE
Minot, ND 58701

☐ Contingent
☐ Unliquidated
☐ Disputed

Date(s) debt was incurred Basis for the claim: Investment Creditor

Last 4 digits of account number Is the claim subject to offset? ☒ No ☐ Yes

3.71 Nonpriority creditor's name and mailing address William & Ginger Quam As of the petition filing date, the claim is: *Check all that apply.* \$50,625.00

9710 107th Ave SE
Minot, ND 58701

☐ Contingent
☐ Unliquidated
☐ Disputed

Date(s) debt was incurred Basis for the claim: Investment Creditor

Last 4 digits of account number Is the claim subject to offset? ☒ No ☐ Yes

3.72 Nonpriority creditor's name and mailing address William & Tammy LaCrosse As of the petition filing date, the claim is: *Check all that apply.* \$500,000.00

PO Box 1835
Williston, ND 58802

☐ Contingent
☐ Unliquidated
☐ Disputed

Date(s) debt was incurred Basis for the claim: Investment Creditor

Last 4 digits of account number Is the claim subject to offset? ☒ No ☐ Yes

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

| Total of claim amounts | |
|------------------------|------------------|
| 5a. | \$ 0.00 |
| 5b. + | \$ 12,327,013.00 |

5c. \$ 12,327,013.00